

BEST AVAILABLE COPY

POSITION	ID NO.	DATE
CLASSIFIER		5 11-25-97
EXAMINER	10(0187)	47-98
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	
1 1	11-25-97
2 2	9
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SYMBOLS

- ✓ Rejected
- = Allowed
- (Through number) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
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